V. Public Health Nursing Administration Responsibility

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We are faddish people! Hair styles are short—they are long. Hem lines are up-they are down. Songs are sweet or "real gone." Agencies have their fads, too, and mental health is now our "pièce de résistance." It is a popular topic and a popular activity, and we all want a "good mental health program." Just what this program really is may not always be clear. It must, however, be defined before the role of the public health nurse can be clarified, for the role of the public health nurse is determined by the framework within which she functions. Administration provides the answer to three questions: How is the role of the public health nurse determined? How are her activities facilitated? And, how is she prepared for her role? Let us briefly review these three areas of administrative responsibility.

How is the role of the public health nurse determined? By planning programs based on clearly understood objectives including the avenues for reaching those objectives. If not clearly defined, the resulting program may be as empty as a well dressed store window with the public health nurse as the manikin. Only after the objectives and avenues have been established can the activity of the staff personnel be determined.

If the objective is focused on therapy for the disturbed and ill, the personnel of the agency becomes concerned with the remedial not preventive. The generalized public health nurse's functions include case finding, referral of patients to community resources for therapy and guidance, and rendering supportive guidance to families of mentally ill patients. The extent of her activity in these areas will depend upon administrative decision and may be influenced by what other resources are available. Referral procedures, cost of visits, integration of these services into the generalized pattern are all factors of administrative concern.

Although the public health nurse has undisputed responsibility in this area, her greatest contribution to mental health is not in the remedial sense. Assuming the objective of the mental health program is really focused on the preventive aspects, then, the remedial becomes either a channel toward that objective or subordinate to the preventive. As Dr. Lemkau has stated, "Programs really should have prophylaxis as their aim. In achieving early treatment the broader prophylatic aim must not be submerged." * In prevention the public health nurse feels at home, for in this she has been active for years, although her activity may have been unidentified as mental health. For example, maternal and child health services have long been recognized as the heart of the public health nursing program.

If preventing mental illness is the program objective, where can activity be more productively focused than in the area of maternal and child health? Where can the public health nurse contribute more toward reaching the objective than in this area of activity? What group can she better serve than

^{*} Lemkau, Paul. Mental Hygiene in Public Health. New York: McGraw-Hill, 1949, p. 234.

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these families to which she already has entre? With the exception of private physicians the public health nurse perhaps has more contact with parents before and during the early years after children are born than any other professional worker. Some of her contributions which come to mind are: interpreting normal growth and development to parents concerned with feeding and toilet training; anticipatory guidance in relation to surgical procedures and hospitalization of children; relieving tensions of new mothers by teaching the bathing of the baby; listening with the third ear as the mother reveals her fears and rejection of pregnancy; and helping the parents accept the limitations of their handicapped child. deciding on the activities of agency personnel in the mental health program let there be little change in the areas of public health nursing activity, but let mental health become a part of her every function, using its concepts more broadly, more deeply, and with awareness in every contact.

How are the activities of the public health nurse in mental health to be facilitated? The expanding of responsibilities and functions sometimes result in a merging and blurring of professional and agency lines. Mental health is one of these areas of mutual responsibility.

To help prepare for this discussion members of several allied disciplines were asked to state their opinions of the public health nurse's place in mental health. The school teacher saw her in relation to the child in school with behavior problems; the department of public welfare worker saw her assisting in early case finding and giving support to families of psychiatric patients; the minister in educating the public to accept mental illness without stigma, shame, or fear; the psychiatric social worker in sharing information with therapists and referring patients for therapy.

The director of a child guidance clinic stated, "The public health nurse does an excellent job of early case finding." From no one was there emphasis on her role in prevention. As one would expect, each saw the public health nurse in a limited, specific capacity in relation to his own responsibility.

Will these co-workers understand if our focus is not in the remedial but in prevention? Will the teacher be confused when she sees the public health nurse working with families who have no children of school age? Will the child guidance clinic director understand that the public health nurse may be active in the field of mental health apart from the clinic setting? Will all accept the fact that her avenues of approach may be different, but not in conflict with theirs? Are they cognizant of the enviable opportunity for creative listening as the nurse cares for the chronically ill in the home? Do these community workers recognize the mental health value of the teaching function of the public health nurse as she interprets scientific knowledge to a fearful individual or misinformed group? success of any program in a community is dependent on all participants understanding the role of each. The clarification and interpretation of functions of public health nursing is an important administrative responsibility.

How is the public health nurse to be prepared for her role? By good basic preparation, a well planned staff education program, and skilled supervision. The supervisor is important in the development of the staff in any area, but particularly is this true in mental health. Agencies have nurses of varying levels of professional development. Some are beginning their professional careers, coming to agencies with sound theory in mental health concepts, but little experience in using these concepts in family settings; their need for supervision is recognized and accepted. As

they learn more of the dynamics of human behavior they may find it disturbing as well as challenging. time they have a particular need of supervision. These are steps in growth and the nurse needs help in growing beyond these levels—a need not peculiar to public health nurses, for all professional workers go though a similar process. Public health nurses need the guidance of a skilled supervisor as they develop toward the professional usage of the knowledge of human behavior and as this knowledge is applied to work situations. Administrators must recognize this need and provide for it.

The supervisor and administrator concerned with determining the factors which differentiate the mediocre from the outstanding public health nurse, seem increasingly to be aware that these plus factors have to do, not only with technical know-how, but with developing skills in teaching, the ability to give support, the art of communication, and a deeper understanding of human needs.

Summary

The contribution of the public health nurse in mental health is dependent upon several factors. These include the inherent and developed qualities of the nurse, the opportunities for professional growth and maturity, and administrative planning and action.

New Albert and Mary Lasker Awards

The International Society for the Welfare of Cripples and the Lasker Foundation recently made a joint announcement of three triennial Albert Lasker Awards for "outstanding services in the development of services for the physically handicapped." The first awards will be presented at the Seventh World Congress of the International Society in London on July 24, 1957.

The awards consist of a silver statuette of the Winged Victory of Samothrace and \$1,000. Their purpose is to emphasize, through the recognition of individual and group accomplishments

that are internationally significant, the importance of improving services for the physically handicapped.

An international committee of experts will select the recipients from nominations made by affiliated organizations or other organizations carrying out programs for the disabled in various countries. Henry Kessler, M.D., director, Kessler Institute for Rehabilitation, New Jersey, is chairman of the Awards Committee, which includes also one representative each from the following countries: Norway, Cuba, Belgium, and Australia.